Case 18-19319 Doc 3 Filed 07/10/18 Entered 07/10/18 15:28:52 Desc Main Document Page 1 of 1

	ill in this i	iformation to identify your					
D	ebtor 1	Dekeira Deondra	McC	See Last Name	VIET POTENTIAL TELE		
D	ebtor 2) HOLIVOURE IN	auge realite	Fast idanie			
l '	pouse, if filing		iddle Name	Last Name			
Uı	nited States	Bankruptcy Court for the: North	ern District	of Illinois			
	ase number fknown)	10-19317	<u> </u>	ATTACA MARIANA			
	,				THE PARTY OF THE P	Check	cif this is an
							ded filing
O	fficial F	Form 103A					
A	polic	ation for Indiv	/idual	s to Pav the	Filing Fee in I	nstallments	12/15
	ormation.	te and accurate as possibl	e. n two m	arried people are lining to	gether, both are equally resp	onsible for supplying correc	τ
	nyt 1.	Sanaific Varia Brancanad	Davenant	Timetable	T.	E POURT	
	art 1:	Specify Your Proposed	Payment	Imetable	T ATATES D	AN AMERICA COLE	
1.		hapter of the Bankruptcy Code		☐ Chapter 7	UNITED STATES BANKAUPIUMOIS NORTHERN DISTRICT OF ILLINOIS		
	аге уоц с	choosing to file under?		☐ Chapter 11	MOK 1 0 5018		
				☐ Chapter 12			
				☐ Chapter 12 ☐ Chapter 13 ☐ Chapter 12 ☐ Chapter 13 ☐ Chapter 14 ☐ Ch		CTFADT, CLEM	
•	V	annly to you the fiting for	in un to		ICEFREY P. A	LAKE 2	
2.	You may apply to pay the filing fee in up to four installments. Fill in the amounts you propose to pay and the dates you plan to pay them. Be sure all dates are business		You propose to pay	Mrs. Market			
		en add the payments you p		\$ <u>77.50</u>	With the filing of the petition	08/10/2018	
		t propose to pay the entire fee no 120 days after you file this	e no		On or before this date	MM / DD / YYYY	
	later than			\$ 77.50	On as before this data 09/10/201	09/10/2018	
	applicatio	kruptcy case. If the court approves your lication, the court will set your final			On or before this date	MM / DD / YYYY	
	payment t	timetable.		\$	On or before this date	10/10/2018 MM / DD / YYYY	
			ي .	77.50	On or before this date	11/10/2018	
			٦	5	On or before this date	MM / DD / YYYY	
Total			Total	\$ 310.00	■ Your total must equal the entire fee for the chapter you checked in line		cked in line 1
					J Tour total little to office 1110	ontho too for the oriapter you are	OROGENTARIO S.
Pá	ırt 2:	Sign Below					
B	v sianina i	here, you state that you are	e unable to	nay the full filing fee at o	nce, that you want to pay the	fee in installments, and that	tvou
	nderstand		, unable to	pay the full thing fee at o	nce, that you want to pay the	rice in instannents, and that	. you
攤			-	• • •	r transfer any more property to	an attorney, bankruptcy petitio	n .
		er, or anyone else for service					
壓	· · · · · · · · · · · · · · · · · · ·						
	debts will not be discharged until your entire fee is paid. If you'do not make any payment when it is due, your bankruptcy case may be dismissed, and your rights in other bankruptcy proceedings						
HS.P	7 1	affected.	sn it is due,	your bankinghtcy case may	be distrissed, and your rights	in other bankruptcy proceeding	io.
4.6	1/2	1	<i>a</i>		4-		
*/	Signature of	**************************************	<u> </u>	nature of Debtor 2	Your atto	rney's name and signature, if you u	sed one
		7-11)-2010	, and the second			,,,,,	
	Date (<u>/ (</u> MM	IDD IYYYY	Da	te MM / DD / YYYY	Date	M / DD /YYYY	